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REPORT OF RECEIPTS

SECRETARY OF THE SENATE

(Revised 02/2003)

4 OCT 23 PM 2:44 **FEC** AND DISBURSEMENTS FORM 3 For An Authorized Committee TYPE OR PRINT Example: If typing, type 1. NAME OF 12FE4M5 COMMITTEE (in full) over the lines. Bellows For Senate ADDRESS (number and street) P.O. Box 136 Check if different Manchester ME 04351 than previously CITY STATE ZIP CODE reported. (ACC) 2. FEC IDENTIFICATION NUMBER STATE DISTRICT □^{AMENDED}
(A) 3. IS THIS ☑_(N) OR REPORT C00550434 ME 4. TYPE OF REPORT (Choose One) (b) 12-Day PRE-Election Report for the: (a) Quarterly Reports: April 15 Quarterly Report (Q1) Primary (12P) General (12G) Runoff (12R) July 15 Quarterly Report (Q2) Convention (12C) Special (12S) October 15 Quarterly Report (Q3) in the 11/04/2014 ME State of January 31 Year-End Report (YE) (c) 30-Day POST-Election Report for the: Runoff (30R) General (30G) Special (30S) Termination Report (TER) in the Election on State of 5. Covering Period 10/01/2014 through 10/15/2014 I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Katie Mae Simpson Type or Print Name of Treasurer Date 0.2 - 4 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the Penalties of 2 U.S.C. 437g. Office **FEC FORM 3** Use

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